

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 12 | 6/12 |
| FORMALITY REVIEW | S.A | 1080 | 6/30/01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | | |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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Best Available Copy